

## City of Lauderhill

## **Finance Department**

## CHANGE OF OWNER / TENANT / MAILING ADDRESS FORM

Date:	Please print legibly	
Owner's Home Phone:	Work Phone:	Ext:
Owner's Name:		
Owner's Street Address:		
City:		
State:		Zip:
Service Address:		
Customer No.		
Correspondence and Billings	To:	
Contact Person:		
Street Address:		
City:		
State:		_Zip:
Phone:	Work:	Ext:
Dual notice to be sent to Own	ner's address? Yes	
	er is responsible for all account ad other parties do not relieve this	
Signature of Owner	Processed By	Date

"The Heart of Broward County"